## **Appendix 12 • Client Rights in MSSP**

## **Client Rights in MSSP**

Welcome to the Multipurpose Senior Services Program (MSSP). The goal of our care management services is to prevent or delay nursing facility placement for our clients. We do this by arranging for and monitoring various supportive services available in the community.

Your care manager will work with you to identify your strengths, resources, priorities, interests and needs. You will have a formal assessment of your situation at least once a year. At that time a plan for your services, called a Care Plan, will be developed. In arranging services

for you, your care manager must first assess and use the assistance available through your family and friends; programs available in the community are the next priority. If there remains a need for additional services when those resources have been exhausted, MSSP may be able

to purchase some services for you. The services that may be available through MSSP include: Adult Day Care, Housing Assistance, Supplemental Chore and Supplemental Personal Care, Care Management, Respite, Transportation, Nutritional Services, Protective Services, and Communication Services.

Both you and your care manager have responsibilities in MSSP.

## It is your responsibility to:

- Provide information necessary for the development of your Care Plans.
- Cooperate with your care manager and the other providers of services you receive.
- Communicate with your care manager about any problems or concerns as they arise.

## It is your care manager's responsibility to:

- Inform you of your rights and responsibilities, including your right to have any complaint or grievance addressed by our local office, and your right to file a request for a Medi-Cal State Hearing at any time if you disagree with any decision made by our program.
- Coordinate the services identified in your Care Plan.
- Provide counseling and guidance.
- Notify you prior to any major changes affecting your Care Plan, including case closure.
- Keep your information confidential.

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It is our intention to deliver high quality services that meet your expectations. However, should you have a complaint, question, or if you are dissatisfied with our decisions or services, please talk it over with your care manager. If you and your care manager cannot resolve the issue, you may ask for a meeting with your care manager's supervisor who is [Enter Supervisor's Name] at [Enter Supervisor's Phone Number].

You may have a family member or representative with you at any time to meet with our program staff.

It has been our experience that most questions can be resolved at the local program level. However, you have the right to initiate a request for a formal Medi-Cal State Hearing at any time. The best way to request a hearing is to fill in the information on the attached form and send it to:

California Department of Social Services State Hearings Division P.O. Box 944243, MS 19-37 Sacramento, CA 94244-2430

You may also request a hearing by calling the Public Inquiry and Response Unit.

Toll-Free Number: 1-800-952-5253 TDD For the Deaf: 1-800-952-8349